

**Fill in this information to identify your case and this filing:**

Debtor 1	<u>Clifford</u>	<u>W.</u>	<u>Cuddy</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>WESTERN DIST. OF PENNSYLVANIA</u>			
Case number (if known)	<u>22-22062</u>		

Check if this is an amended filing

**Official Form 106A/B**

**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.  
 Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... → \$0.00

**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No  
 Yes

		Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
3.1.	Make: <u>Chevrolet</u>	<input checked="" type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
	Model: <u>Van</u>	<input type="checkbox"/> Debtor 2 only	<u>\$3,275.00</u>	<u>\$3,275.00</u>
	Year: <u>1987</u>	<input type="checkbox"/> Debtor 1 and Debtor 2 only		
	Approximate mileage: <u>146,000</u>	<input type="checkbox"/> At least one of the debtors and another		
Other information: <b>1987 Chevrolet Van (approx. 146,000 miles)</b>		<input type="checkbox"/> Check if this is community property (see instructions)		
3.2.		Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
Make: <u>Chevrolet</u>	Model: <u>G30 Van</u>	<input checked="" type="checkbox"/> Debtor 1 only	Current value of the entire property?	Current value of the portion you own?
Year: <u>1995</u>	Approximate mileage: <u>160,000</u>	<input type="checkbox"/> Debtor 2 only	<u>\$500.00</u>	<u>\$500.00</u>
Other information: <b>1995 Chevrolet G30 Van (approx. 160,000 miles). Does not run. Will not pass inspection</b>		<input type="checkbox"/> Check if this is community property (see instructions)		

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... →

\$3,775.00

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- No  
 Yes. Describe..... **Household goods and furnishings**

\$500.00

7. **Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No  
 Yes. Describe.....

8. **Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- No  
 Yes. Describe.....

9. **Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- No  
 Yes. Describe..... **Handtools**

\$1,500.00

10. **Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- No  
 Yes. Describe.....

11. **Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- No  
 Yes. Describe..... **Everyday wearing apparel**

\$300.00

12. **Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- No  
 Yes. Describe.....

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

No

Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....**



**\$2,300.00**

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

**16. Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes..... Cash: .....

**17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes..... Institution name:

17.1. Checking account: **S&T Bank Checking Account** **\$495.00**

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes..... Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

No

Yes. Give specific information about them..... Name of entity:

% of ownership:

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them..... Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately. Type of account: \_\_\_\_\_ Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company  
*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes..... Institution name or individual:

**23. Annuities** (A contract for a specific periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description:

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them

	_____
--	-------

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them

	_____
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**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them

	_____
--	-------

**Money or property owed to you?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

_____
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Federal: \_\_\_\_\_

State: \_\_\_\_\_

Local: \_\_\_\_\_

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information

--

Alimony:

Maintenance:

Support:

Divorce settlement:

Property settlement:

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information

**Disability check in the amount of \$200.00 to correct a miscalculation of monthly payment**

**\$200.00**

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value..... Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

No

Yes. Give specific information

--

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim.....

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**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

No

Yes. Describe each claim.....

--

**35. Any financial assets you did not already list**

No

Yes. Give specific information

--

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... →**

**\$695.00**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.

Yes. Go to line 38.

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

- No  
 Yes. Describe...

 

**39. Office equipment, furnishings, and supplies**

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- No  
 Yes. Describe...

 

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

- No  
 Yes. Describe...

 

**41. Inventory**

- No  
 Yes. Describe...

 

**42. Interests in partnerships or joint ventures**

- No  
 Yes. Describe..... Name of entity: % of ownership:

**43. Customer lists, mailing lists, or other compilations**

- No  
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
 No  
 Yes. Describe...

 

**44. Any business-related property you did not already list**

- No  
 Yes. Give specific information.

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... → \$0.00**

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.**

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- No. Go to Part 7.  
 Yes. Go to line 47.

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**47. Farm animals**

Examples: Livestock, poultry, farm-raised fish

- No  
 Yes....

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**48. Crops--either growing or harvested**

- No  
 Yes. Give specific information.....

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**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- No  
 Yes....

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**50. Farm and fishing supplies, chemicals, and feed**

- No  
 Yes....

--	--

**51. Any farm- and commercial fishing-related property you did not already list**

- No  
 Yes. Give specific information.....

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**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... →**

**\$0.00**

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

- No  
 Yes. Give specific information.

**54. Add the dollar value of all of your entries from Part 7. Write that number here..... →**

**\$0.00**

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2.....	→	\$0.00
56. Part 2: Total vehicles, line 5		<u>\$3,775.00</u>
57. Part 3: Total personal and household items, line 15		<u>\$2,300.00</u>
58. Part 4: Total financial assets, line 36		<u>\$695.00</u>
59. Part 5: Total business-related property, line 45		<u>\$0.00</u>
60. Part 6: Total farm- and fishing-related property, line 52		<u>\$0.00</u>
61. Part 7: Total other property not listed, line 54	+ \$0.00	
62. Total personal property. Add lines 56 through 61.....	<b>\$6,770.00</b>	Copy personal property total → + <u>\$6,770.00</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		<b>\$6,770.00</b>

**Fill in this information to identify your case:**

Debtor 1	<b>Clifford</b>	<b>W.</b>	<b>Cuddy</b>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

Check if this is an amended filing

**Official Form 106C**

**Schedule C: The Property You Claim as Exempt**

**04/22**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
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Brief description: <b>1987 Chevrolet Van (approx. 146,000 miles)</b>	<b>\$3,275.00</b>	<input checked="" type="checkbox"/> <b>\$3,275.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(2)</b>
Line from <i>Schedule A/B</i> : <b>3.1</b>			

Brief description: <b>1995 Chevrolet G30 Van (approx. 160,000 miles). Does not run. Will not pass inspection</b>	<b>\$500.00</b>	<input checked="" type="checkbox"/> <b>\$500.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(1)</b>
Line from <i>Schedule A/B</i> : <b>3.2</b>			

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	<i>Check only one box for each exemption</i>	
Brief description: <b>Household goods and furnishings</b>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from Schedule A/B: <u>6</u>			
Brief description: <b>Handtools</b>	<u>\$1,500.00</u>	<input checked="" type="checkbox"/> <u>\$1,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from Schedule A/B: <u>9</u>			
Brief description: <b>Everyday wearing apparel</b>	<u>\$300.00</u>	<input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(3)</b>
Line from Schedule A/B: <u>11</u>			
Brief description: <b>S&amp;T Bank Checking Account</b>	<u>\$495.00</u>	<input checked="" type="checkbox"/> <u>\$495.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from Schedule A/B: <u>17.1</u>			
Brief description: <b>Disability check in the amount of \$200.00 to correct a miscalculation of monthly payment</b>	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>11 U.S.C. § 522(d)(5)</b>
Line from Schedule A/B: <u>30</u>			

**Fill in this information to identify your case:**

Debtor 1	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

Check if this is an amended filing

**Official Form 106D**

**Schedule D: Creditors Who Have Claims Secured by Property**

**12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

- 2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

<b>Column A</b> <b>Amount of claim</b> Do not deduct the value of collateral	<b>Column B</b> <b>Value of collateral that supports this claim</b>	<b>Column C</b> <b>Unsecured portion if any</b>
_____	_____	_____

2.1

**Describe the property that secures the claim:** \_\_\_\_\_

Creditor's name \_\_\_\_\_

Number Street \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Who owes the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Nature of lien.** Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset)

**Check if this claim relates to a community debt**

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$0.00

**Fill in this information to identify your case:**

Debtor 1	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

Check if this is an amended filing

**Official Form 106E/F**

**Schedule E/F: Creditors Who Have Unsecured Claims**

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.1	Priority Creditor's Name	Last 4 digits of account number	_____
Number Street	When was the debt incurred?	_____	_____
City State ZIP Code	As of the date you file, the claim is: Check all that apply.	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:	<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____	
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	Is the claim subject to offset?	<input type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.**

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

4.1	<p><b>Allegeny Clinic Radiology</b> Nonpriority Creditor's Name <b>PO Box 645367</b> Number Street</p> <p><b>Pittsburgh PA 15264</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$176.00</b>
<p>Last 4 digits of account number <u>7 0 1 5</u></p> <p>When was the debt incurred? <u>10/18/2021</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical Bill</b></p>		
4.2	<p><b>Allegeny Clinic Radiology</b> Nonpriority Creditor's Name <b>PO Box 645367</b> Number Street</p> <p><b>Pittsburgh PA 15264</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>\$728.00</b>
<p>Last 4 digits of account number <u>9 5 0 0</u></p> <p>When was the debt incurred? <u>08/17/2022</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical Bill</b></p>		

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3

\$26.00

**Allegheny Clinic Radiology**  
Nonpriority Creditor's Name  
**PO Box 645367**  
Number Street

Last 4 digits of account number                            

When was the debt incurred? 09/14/2021

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Pittsburgh PA 15264**  
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical Bill**

4.4

\$523.00

**Allegheny Health Network**  
Nonpriority Creditor's Name  
**PO Box 645266**  
Number Street

Last 4 digits of account number 2 5 6 4

When was the debt incurred? 09/01/2021

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Pittsburgh PA 15264**  
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical Bill**

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.5

\$9,115.73

**Allegheny Health Network**  
Nonpriority Creditor's Name  
**PO Box 645266**  
Number Street

Last 4 digits of account number 2 5 6 4

When was the debt incurred? 08/15/2021

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Pittsburgh PA 15264**  
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical Bill**

4.6

\$303.00

**Americollect**  
Nonpriority Creditor's Name  
**1851 A Alverno Road**  
Number Street

Last 4 digits of account number 3 6 6 2

When was the debt incurred? 09/22/2020

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Manitowoc WI 54221**  
City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical/Foundaiton Radiology**

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.7

Unknown

**Ave Marie Dlubak**  
Nonpriority Creditor's Name  
**152 Baker Road**  
Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Freeport PA 16229**  
City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Potential Claim**

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

**\$142.02**

**Butler Emergency Physicians Assoc**  
Nonpriority Creditor's Name  
**PO Box 3478**  
Number Street

Last 4 digits of account number 1 1 C M

When was the debt incurred? 08/15/2021

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Wescosville PA 18106-0478**  
City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Medical Bill**

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.9	<b>Butler Imaging and Interventional Assoc.</b> Nonpriority Creditor's Name <b>7 Acee Drive</b> Number Street  <b>Natrona Heights PA 15065-9700</b> City State ZIP Code	<b>\$200.00</b>
	<p>Last 4 digits of account number <u>5 4 7 1</u>  When was the debt incurred? <u>08/15/2021</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Medical Bill</b></p>	
	<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	
4.10	<b>Butler Memorial Hospital</b> Nonpriority Creditor's Name <b>PO Box 37171</b> Number Street  <b>Baltimore MD 21297</b> City State ZIP Code	<b>\$6,695.66</b>
	<p>Last 4 digits of account number <u>8 3 0 3</u>  When was the debt incurred? <u>10/21/2021</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify  <b>Medical Bill</b></p>	
	<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.11

\$12,305.81

**RSource**

Nonpriority Creditor's Name  
**433 Plaza Real - Suite 255**  
 Number Street  
**Boca Raton**

**Boca Raton** FL 33432  
 City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number 8 8 3 0

When was the debt incurred? 09/01/2021

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical Bill/West Penn Hospital**

4.12

\$813.08

**State Collection Service**

Nonpriority Creditor's Name  
**PO Box 6250**  
 Number Street

**Madison** WI 53716  
 City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number 1 5 4 8

When was the debt incurred? 09/14/2022

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical Bill/AHN**

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.13

\$151.50

**State Collection Service Inc.**  
Nonpriority Creditor's Name  
**PO Box 6250**  
Number Street

Last 4 digits of account number 0 8 6 9

When was the debt incurred? 03/02/2022

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Madison WI 53716**  
City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical Bill/AHN**

4.14

\$1,555.63

**US Acute Care Solutions**  
Nonpriority Creditor's Name  
**PO Box 9820**  
Number Street

Last 4 digits of account number 9 5 8 6

When was the debt incurred? 10/2021

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Coral Springs FL 33075**  
City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical Bill**

Debtor 1 Clifford W. Cuddy Case number (if known) 22-22062

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Louis J. Kroeck, IV** On which entry in Part 1 or Part 2 did you list the original creditor?  
Name \_\_\_\_\_  
**LJK Law PLLC** Line 4.7 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
Number Street \_\_\_\_\_  Part 2: Creditors with Nonpriority Unsecured Claims  
**1200 Sarah Street** \_\_\_\_\_

**Pittsburgh** Last 4 digits of account number i v i l  
City \_\_\_\_\_ State **PA** ZIP Code **15203**

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.  
28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
Total claims from Part 1	
6a. Domestic support obligations	6a. <u>\$0.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
6e. Total. Add lines 6a through 6d.	6d. <u>\$0.00</u>

	Total claim
Total claims from Part 2	
6f. Student loans	6f. <u>\$0.00</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$32,735.43</u>
6j. Total. Add lines 6f through 6i.	6j. <u>\$32,735.43</u>

**Fill in this information to identify your case:**

Debtor 1	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

Check if this is an amended filing

**Official Form 106G**

**Schedule G: Executory Contracts and Unexpired Leases**

**12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

**Person or company with whom you have the contract or lease**

**State what the contract or lease is for**

**Fill in this information to identify your case:**

Debtor 1	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

Check if this is an amended filing

**Official Form 106H**

**Schedule H: Your Codebtors**

**12/15**

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)  
 No  
 Yes
2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  
 No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
 No  
 Yes
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

*Column 1: Your codebtor*

*Column 2: The creditor to whom you owe the debt*

Check all schedules that apply:

<b>Fill in this information to identify your case:</b>			
<b>Debtor 1</b>	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
<b>Debtor 2</b> (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		<b>WESTERN DIST. OF PENNSYLVANIA</b>	
<b>Case number</b> (if known)	<b>22-22062</b>		

Check if this is:

- An amended filing
  - A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

**Official Form 106I**

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

## **Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal,  
or self-employed work

Occupation may include student or homemaker, if it applies.

<b>Debtor 1</b>	<b>Debtor 2 or non-filing spouse</b>	
<b>Employment status</b>	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
<b>Occupation</b>	<hr/> <hr/>	
<b>Employer's name</b>	<hr/> <hr/>	
<b>Employer's address</b>	Number Street <hr/> <hr/> <hr/>	Number Street <hr/> <hr/> <hr/>
	City _____ State _____ Zip Code _____	City _____ State _____ Zip Code _____

#### **How long employed there?**

#### **Part 2: Give Details About Monthly Income**

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	<u>For Debtor 1</u>	<u>For Debtor 2 or non-filing spouse</u>
<b>2. List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. _____ \$0.00	_____
<b>3. Estimate and list monthly overtime pay.</b>	3. + _____ \$0.00	_____
<b>4. Calculate gross income.</b> Add line 2 + line 3.	4. _____ \$0.00	_____

Debtor 1	Case number (if known)	
	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here .....</b> ➔	<b>4.</b>	<b>\$0.00</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00
5e. Insurance	5e.	\$0.00
5f. Domestic support obligations	5f.	\$0.00
5g. Union dues	5g.	\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7.	\$0.00
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00
8b. Interest and dividends	8b.	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00
8d. Unemployment compensation	8d.	\$0.00
8e. Social Security	8e.	\$1,502.00
8f. Other government assistance that you regularly receive  Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: <u>Snap</u>	8f.	\$250.00
8g. Pension or retirement income	8g.	\$0.00
8h. Other monthly income. Specify: _____	8h. +	\$0.00
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,752.00
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$1,752.00
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify: _____	11. +	\$0.00
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12.	\$1,752.00
		Combined monthly income

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

13. Do you expect an increase or decrease within the year after you file this form?

- No. **None.**
- Yes. Explain:

**Fill in this information to identify your case:**

Debtor 1	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

**Schedule J: Your Expenses**

**12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes
		<input type="checkbox"/> No
		<input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

**Your expenses**

4. The rental or home ownership expenses for your residence.  
 Include first mortgage payments and any rent for the ground or lot.

4. **\$450.00**

If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

4a. \_\_\_\_\_  
 4b. \_\_\_\_\_  
 4c. \_\_\_\_\_  
 4d. \_\_\_\_\_

Debtor 1	<u>Clifford W. Cuddy</u>	Case number (if known)	<u>22-22062</u>
<u>Your expenses</u>			
5.	Additional mortgage payments for your residence, such as home equity loans		
6.	<b>Utilities:</b>		
6a.	Electricity, heat, natural gas		
6b.	Water, sewer, garbage collection		
6c.	Telephone, cell phone, Internet, satellite, and cable services		
6d.	Other. Specify: _____		
7.	<b>Food and housekeeping supplies</b>		
8.	<b>Childcare and children's education costs</b>		
9.	<b>Clothing, laundry, and dry cleaning</b>		
10.	<b>Personal care products and services</b>		
11.	<b>Medical and dental expenses</b>		
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.		
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>		
14.	<b>Charitable contributions and religious donations</b>		
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance		
15b.	Health insurance		
15c.	Vehicle insurance		
15d.	Other insurance. Specify: _____		
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
17.	<b>Installment or lease payments:</b>		
17a.	Car payments for Vehicle 1		
17b.	Car payments for Vehicle 2		
17c.	Other. Specify: _____		
17d.	Other. Specify: _____		
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>		
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____		

Debtor 1 **Clifford W. Cuddy**

Case number (if known) **22-22062**

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

- |   |            |
|---|------------|
| 20a. Mortgages on other property                  | 20a. _____ |
| 20b. Real estate taxes                            | 20b. _____ |
| 20c. Property, homeowner's, or renter's insurance | 20c. _____ |
| 20d. Maintenance, repair, and upkeep expenses     | 20d. _____ |
| 20e. Homeowner's association or condominium dues  | 20e. _____ |

**21. Other.** Specify: \_\_\_\_\_

21. + \_\_\_\_\_

**22. Calculate your monthly expenses.**

- |   |                              |
|---|------------------------------|
| 22a. Add lines 4 through 21.  | 22a. _____ <b>\$1,675.00</b> |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. _____                   |
| 22c. Add line 22a and 22b. The result is your monthly expenses.                       | 22c. _____ <b>\$1,675.00</b> |

**23. Calculate your monthly net income.**

- |   |                                |
|---|--------------------------------|
| 23a. Copy line 12 (your combined monthly income) from Schedule I.                                       | 23a. _____ <b>\$1,752.00</b>   |
| 23b. Copy your monthly expenses from line 22c above.  | 23b. - _____ <b>\$1,675.00</b> |
| 23c. Subtract your monthly expenses from your monthly income.<br>The result is your monthly net income. | 23c. _____ <b>\$77.00</b>      |

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here:

**None.**

<b>Fill in this information to identify your case:</b>			
Debtor 1	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

#### Part 1: Summarize Your Assets

		<b>Your assets</b> Value of what you own
1.	<i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$0.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$6,770.00
1c.	Copy line 63, Total of all property on Schedule A/B.....	<b>\$6,770.00</b>

#### Part 2: Summarize Your Liabilities

		<b>Your liabilities</b> Amount you owe
2.	<i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a.	Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	\$0.00
3.	<i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$0.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ \$32,735.43
		<b>Your total liabilities</b>
		<b>\$32,735.43</b>

#### Part 3: Summarize Your Income and Expenses

4.	<i>Schedule I: Your Income</i> (Official Form 106I)	
	Copy your combined monthly income from line 12 of Schedule I.....	\$1,752.00
5.	<i>Schedule J: Your Expenses</i> (Official Form 106J)	
	Copy your monthly expenses from line 22c of Schedule J.....	\$1,675.00

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

- Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
 **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$0.00

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

**Total claim**

**From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations. (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<u>+ \$0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.	<u><b>\$0.00</b></u>

**Fill in this information to identify your case:**

Debtor 1	<u>Clifford</u> First Name	<u>W.</u> Middle Name	<u>Cuddy</u> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>WESTERN DIST. OF PENNSYLVANIA</u>			
Case number (if known)	<u>22-22062</u>		

Check if this is an amended filing

**Official Form 106Dec**

**Declaration About an Individual Debtor's Schedules**

**12/15**

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Clifford W. Cuddy  
Clifford W. Cuddy, Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date 10/26/2022  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

Check if this is an amended filing

Official Form 107

**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before**

**1. What is your current marital status?**

- Married  
 Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

## Part 2: Explain the Sources of Your Income

### 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

Debtor 1	Debtor 2		
Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____	
For last calendar year: (January 1 to December 31, <u>2021</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <b>\$11,834.00</b> <input checked="" type="checkbox"/> Operating a business _____	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____	
For the calendar year before that: (January 1 to December 31, <u>2020</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <b>\$19,624.00</b> <input checked="" type="checkbox"/> Operating a business _____	<input type="checkbox"/> Wages, commissions, bonuses, tips _____ <input type="checkbox"/> Operating a business _____	

### 5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

Debtor 1	Debtor 2		
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<b>SSD</b> _____ <b>\$14,770.00</b> _____ _____ _____	_____ _____ _____ _____	
For last calendar year: (January 1 to December 31, <u>2021</u> ) YYYY	_____ _____ _____ _____	_____ _____ _____ _____	
For the calendar year before that: (January 1 to December 31, <u>2020</u> ) YYYY	_____ _____ _____ _____	_____ _____ _____ _____	

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

### Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.

- Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

- No

- Yes. List all payments to an insider.

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

- No

- Yes. List all payments that benefited an insider.

### Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- No

- Yes. Fill in the details.

Case title	Nature of the case	Court or agency	Status of the case
Ave Marie Dlubek v. Clifford Cuddy d/b/a Cuddy's Construction	Civil Action	Armstrong County Court Name Market Street - Suite 103 Number Street	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number <u>2022-1171-Civil</u>		Kittanning PA 16201 City State ZIP Code	

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- No. Go to line 11.  
 Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- No  
 Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- No  
 Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- No  
 Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- No  
 Yes. Fill in the details for each gift or contribution.

#### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- No  
 Yes. Fill in the details.

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

### Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

No

Yes. Fill in the details.

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

### Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

### Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- No  
 Yes. Fill in the details.

### Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- No  
 Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- No  
 Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No  
 Yes. Fill in the details.

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

### Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
  - A member of a limited liability company (LLC) or limited liability partnership (LLP)
  - A partner in a partnership
  - An officer, director, or managing executive of a corporation
  - An owner of at least 5% of the voting or equity securities of a corporation
- No. None of the above applies. Go to Part 12.
- Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No
- Yes. Fill in the details below.

### Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Clifford W. Cuddy  
Clifford W. Cuddy, Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date 10/26/2022

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No
- Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No
- Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petitioner Preparer's Notice, Declaration, and Signature* (Official Form 119).

**Fill in this information to identify your case:**

Debtor 1	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

Check if this is an amended filing

**Official Form 108**

**Statement of Intention for Individuals Filing Under Chapter 7**

**12/15**

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Hold Secured Claims**

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

None.

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

**X** /s/ Clifford W. Cuddy

Clifford W. Cuddy, Debtor 1

**X** \_\_\_\_\_

Signature of Debtor 2

Date 10/26/2022

MM / DD / YYYY

Date \_\_\_\_\_

MM / DD / YYYY

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF PENNSYLVANIA  
PITTSBURGH DIVISION

In re **Clifford W. Cuddy**

Case No. 22-22062

Chapter 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<u>\$1,595.00</u>
Prior to the filing of this statement I have received.....	<u>\$1,595.00</u>
Balance Due.....	<u>\$0.00</u>

2. The source of the compensation paid to me was:

Debtor       Other (specify)

3. The source of compensation to be paid to me is:

Debtor       Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Representation of the Debtor(s) at the meeting of creditors only.**

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**These services shall be deemed to be additional services:**

1. Attendance at any additional First Meeting(s) of Creditors, or hearings, scheduled by the Court;
2. Preparation and filing of any Amendment(s) to Voluntary Petition which may be necessary;
3. Preparation and filing of any Motion(s), including a Motion To Avoid Judgment Lien(s), 506 action(s), etc.;
4. Response(s) and representation in relation to any inquiry or action initiated by the Chapter 7 Trustee's Office.
5. Response(s) and representation in relation to any inquiry or action initiated by the United States Trustee's Office;
6. The defense of any action initiated by Creditor(s), or any third parties, the Chapter 7 Trustee's Office and/or the United States Trustee's Office.

Any additional services, which may be required, shall be billed at the rate of \$150.00 per hour.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

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10/26/2022

Date

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/s/ Gino F. Peluso, Esq.

Gino F. Peluso, Esq.

Bar No. 33740

Gino F. Peluso, Attorney At Law  
One Peluso Place - Suite A  
2692 Leechburg Road  
Lower Burrell, PA 15068  
Phone: (724) 339-8710 / Fax: (724) 339-3803  
gp@attornewypeluso.com

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/s/ Clifford W. Cuddy

Clifford W. Cuddy

<b>Fill in this information to identify your case:</b>			
Debtor 1	<b>Clifford</b> First Name	<b>W.</b> Middle Name	<b>Cuddy</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>WESTERN DIST. OF PENNSYLVANIA</b>			
Case number (if known)	<b>22-22062</b>		

<b>Check one box only as directed in this form and in Form 122A-1Supp:</b>		
<input checked="" type="checkbox"/> 1. There is no presumption of abuse.		
<input type="checkbox"/> 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).		
<input type="checkbox"/> 3. The Means Test does not apply now because of qualified military service but it could apply later.		
<input type="checkbox"/> Check if this is an amended filing		

**Official Form 122A-1**

**Chapter 7 Statement of Your Current Monthly Income**

**12/19**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

**Part 1: Calculate Your Current Monthly Income**

**1. What is your marital and filing status? Check one only.**

- Not married.** Fill out Column A, lines 2-11.
- Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- Married and your spouse is NOT filing with you. You and your spouse are:**
- Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	<b>Column A</b> <b>Debtor 1</b>	<b>Column B</b> <b>Debtor 2 or non-filing spouse</b>
<b>2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).</b>	<b>\$0.00</b>	
<b>3. Alimony and maintenance payments.</b> Do not include payments from a spouse if Column B is filled in.	<b>\$0.00</b>	
<b>4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.</b> Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	<b>\$0.00</b>	

**Debtor 1 Clifford W. Cuddy**

Case number (if known) 22-22062

**Column A**

*Column B*  
**Debtor 2 or  
non-filing spouse**

**5. Net income from operating a business, profession, or farm**

**Debtor 1** **Debtor 2**

**Gross receipts (before all deductions)** \$0.00

Ordinary and necessary operating expenses — \$0.00 —

Net monthly income from a business, **\$0.00**      copy here → \$0.00

Copy  
here

**6. Net income from rental and other real property**

**Debtor 1** **Debtor 2**

**Gross receipts (before all deductions)** \$0.00

Ordinary and necessary operating expenses — \$0.00 —

**Copy  
here ➔ \$0.00**

## 7 Interest, dividends and royalties

\$0.00

#### **8. Unemployment compensation**

\$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: .....

For you..... \$0.00

For your spouse.....

**9. Pension or retirement income.** Do not include any amount received that  
**\$0.00**

was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

+ +

Debtor 1 Clifford W. Cuddy

Case number (if known) 22-22062

Column A  
Debtor 1

Column B  
Debtor 2 or  
non-filing spouse

\$0.00

 

\$0.00

Total current  
monthly income

**11. Calculate your total current monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

## Part 2: Determine Whether the Means Test Applies to You

**12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11.....**Copy line 11 here →** 12a. **\$0.00**

Multiply by 12 (the number of months in a year).

12b. The result is your annual income for this part of the form.

**X 12**

12b. **\$0.00**

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

**Pennsylvania**

Fill in the number of people in your household.

**1**

Fill in the median family income for your state and size of household..... 13. **\$60,640.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*. Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*. Go to Part 3 and fill out Form 122A-2.

## Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X /s/ Clifford W. Cuddy**

Clifford W. Cuddy, Debtor 1

Date 10/26/2022

MM / DD / YYYY

**X**

Signature of Debtor 2

Date

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.